

GIC Health Plan Rates

MONTHLY RATES AS OF JULY 1, 2022 FOR THE TOWN OF ARLINGTON ENROLLEES

Active Employees and Retirees without Medicare* (Includes Public Safety-Police/Fire)

	Employee and Non-Medicare Retiree Pays Monthly %	Employee and Non-Medicare Retiree Pays Monthly \$	Employee and Non-Medicare Retiree Pays Monthly \$
Health Plan		Individual Coverage	Family Coverage
Harvard Pilgrim Independence Plan	20%	207.20	506.92
Harvard Pilgrim Primary Choice Plan	15%	112.00	286.40
Health New England	15%	100.44	240.28
Allways Health Partners	15%	126.64	331.72
Tufts Health Plan Navigator	20%	178.20	436.60
Tufts Health Plan Spirit	15%	101.32	245.16
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	25%	309.76	688.16
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	25%	294.96	654.48
UniCare State Indemnity Plan/Community Choice	20%	124.76	310.68
UniCare State Indemnity Plan/PLUS	20%	162.24	387.72

Retirees with Medicare

	Retiree Retiree Pays Monthly Per Person	
Health Plan	%	\$
Harvard Pilgrim Medicare Enhance	25%	105.96
Health New England Medicare Plus	25%	107.56
Tufts Health Plan Medicare Complement	25%	101.48
Tufts Health Plan Medicare Preferred*	15%	51.80
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with CIC (Comprehensive)</i>	25%	103.32
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without CIC (Non-Comprehensive)</i>	25%	100.48

***THESE RATES APPLY TO RETIREES OF THE TOWN OF ARLINGTON WITH A HIRE DATE BEFORE 12/1/2011. FOR RETIREES HIRED ON OR AFTER 12/1/2011, RATES ARE 25% ACROSS THE BOARD.**

Rates are calculated by the Town of Arlington Human Resources Department

**RATE QUESTIONS?
CALL: 781-316-3120**

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Survivors without Medicare

	Survivor Pays Monthly %	Survivor Pays Monthly \$	Survivor Pays Monthly \$
Health Plan		Individual Coverage	Family Coverage
Harvard Pilgrim Independence Plan	50%	518.01	1267.31
Harvard Pilgrim Primary Choice Plan	50%	373.36	954.79
Health New England	50%	334.85	801.06
Allways Health Partners	50%	422.23	1105.82
Tufts Health Plan Navigator	50%	445.58	1091.57
Tufts Health Plan Spirit	50%	337.86	817.27
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	50%	619.54	1376.32
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	50%	589.96	1308.97
UniCare State Indemnity Plan/Community Choice	50%	311.91	776.70
UniCare State Indemnity Plan/PLUS	50%	405.69	969.37

Survivors with Medicare

	Survivor Survivor Pays Monthly Per Person	
Health Plan	%	
Harvard Pilgrim Medicare Enhance	50%	211.98
Health New England Medicare Plus	50%	215.14
Tufts Health Plan Medicare Complement	50%	203.01
Tufts Health Plan Medicare Preferred	50%	172.71
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with CIC (Comprehensive)</i>	50%	206.68
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without CIC (Non-Comprehensive)</i>	50%	201.00

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MONTHLY RATES AS OF JULY 1, 2022
FOR THE TOWN OF ARLINGTON ENROLLEES HIRED *on or after* 12/1/11

Active Employees and Retirees without Medicare
(Includes Public Safety-Police/Fire)

	Employee and Non-Medicare Retiree Pays Monthly %	Employee and Non-Medicare Retiree Pays Monthly \$	Employee and Non-Medicare Retiree Pays Monthly \$
Health Plan		Individual Coverage	Family Coverage
Harvard Pilgrim Independence Plan	25%	259.00	633.64
Harvard Pilgrim Primary Choice Plan	25%	186.68	477.36
Health New England	25%	167.40	400.52
Allways Health Partners	25%	211.08	552.88
Tufts Health Plan Navigator	25%	222.76	545.76
Tufts Health Plan Spirit	25%	168.92	408.60
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	25%	309.76	688.16
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	25%	294.96	654.48
UniCare State Indemnity Plan/Community Choice	25%	155.92	388.32
UniCare State Indemnity Plan/PLUS	25%	202.84	484.68

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